

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

RECEIVED  
SECRETARY OF THE SENATE

1. (a) Name of Candidate (in full) Shelley Berkley			2. Identification Number S2NV00209	
(b) Address (number and street) 3077 E. Warm Springs Rd.			3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)	
(c) City, State and ZIP Code Las Vegas NV 89120				
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought Senate	6. State & District of Candidate NV 00		

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Berkley for Senate		
(b) Address (number and street) 3077 E. Warm Springs Rd.		
(c) City, State and ZIP Code Las Vegas NV 89120		

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**


(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Minnesota Nevada Victory Fund		
(b) Address (number and street) 426 C St NE		
(c) City, State and ZIP Code Washington DC 20002		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate Shelley Berkley 	Date 09/18/2011
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**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED Sept. 21, 2011  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
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USPS REGISTERED/CERTIFIED \_\_\_\_\_  
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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

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OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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PREPARER all DATE PREPARED Sept. 21, 2011

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